STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15) RECEIVED

JUL 25 2018

PLEASE PRINT

I. Name of Lobbyist(s):

603-228-1181

(Telephone)

PAUL A. WORSOWICZ

II. Name of Lobbyist's partnership, firm or corporation, if any:

DEPARTMENT OF STATE GALLAGHER, CALLAHAN & GARTRELL, P.C. 214 North Main Street, Concord, NH 03301 603-226-3334 worsowicz@gcglaw.com (Fax) (Email) III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client.)

All reportable transactions occurring in the month prior to the reporting date relative to the following client. (Full Name of Client as it appears on the Lobbyist Registration Form) **OR**

All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client.

July 25, 2018 🗵 April 25, 2018 🗆 IV. Date of Report: activity from 4/1/18 to 6/30/18 Reports cover: activity from date of registration to 3/31/18 October 31, 2018 January 30, 2019 activity from 7/1/18 to 9/30/18 activity from 10/1/18 to 12/31/18

V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301.

VI. Check if additional reports are attached:

☐ If you have received fees or made expenditures, you must file Addendum A – Fees and Expenses

☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B - Report of Honorariums or Expense Reimbursement

If you, your firm, or your family has made political contributions, you must file Addendum C - Political Contributions

Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

7-/7-/8
(Date)

PAUL A. WORSOWICZ (Print Name of lobbyist)



STATE OF NEW HAMPSHIRE Lobbyists Report of Political Contributions Addendum C

(RSA Chapter 15:6)

I. Name of Lobbyist(s)	PAUL A. WORSOWICZ			
II. Name of lobbyist's par	tnership, firm or corporation	on, if any:		
	GALLAGHER, CALL	AHAN & GARTRELL, P.	c.	
		hip, firm or corporation)	<u>u. </u>	
III. Name of Client	Date July 25, 2018			
	ution that is reportable puring firm, indicate the follow		paid on behalf of the	
Full name of candidate:	Political Action Com	mittee: CHRIS PAPPAS I	FOR CONGRESS	
	(Last Name)	(First Name)	(Middle Name/Initial)	
Amount of Contribution \$50	00.00 Office Candidate is S	eeking <u>U.S. CONGRESS</u>		
enter an estimated value and	the word "estimate." Political Action Com	nittee;		
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)	
Amount of Contribution \$_	Office Candidate is	, , , , , , , , , , , , , , , , , , , ,		
			vices provided, and enter the f the actual cost is not known,	
	<u> </u>			
Full name of candidate:	Political Action Comm (Last Name)		(Middle Name/Initial)	
		(First Name)	(Mildole Manie (111081)	
Amount of Contribution \$_	Office Candidate is	Seeking(turn	over to continue >	

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."	
	_
(If more than three contributions were made, report additional contributions on separate addendum C forms.)	
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.	
By: Saul Chi oraning 7-17-18 (Signature of lobbyist) (Date)	
PAUL A. WORSOWICZ	
(Print Name of Lobbyist)	

·

1

.

: